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OI - FIR/31 5 Feb 46

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MILITARY INTELLIGENCE SERVICE CENTER
APO 757

OI FINAL INTERROGATION REPORT (OI - FIR) No. 31

### HITLER'S TEETH

Source: BLASCHKE, Dr Hugo Johannes

Position: Brig Gen in Waffen SS,

This is the third report of a series dealing with Hitler's physical and mental condition. It is based on information obtained from the dentist who treated Hitler from the beginning of 1934 to 20 Apr 45.

Table of Contents	Page
REFERENCIS	
REASON FOR REPORT	
REPORT: "HITLER'S TEETH"	
a: Introduction: Source b. Characteristics of Hitler's Teeth (1) Verbal Description (a) Natural Teeth (b) Replacements (c) Cavities untreated (d) Color of Teeth (2) Drawings	
CONCLUSIONS	7

### Annexes

ANNEX I: Treatments of Hitler

ANNIX II: Nartin Bormann's Teeth

ANNIX III: Eva Braun's Teeth

AMER IV: Chronological Account of Source's Career

# Color of Teeth

(NOTE: The color symbols used are those of the S.S.WHITE color ring for dentists.)

All natural teeth and replacements had the color "21".

- NOTES: 1. BLASCHEE considers it possible that the upper right 1st molar was lost in early youth, causing the 2nd and 3rd molars to move forward and close the gap. In that case there would be present (starting from 1st bicuspid) 1st and 2nd bicuspid, 2nd and 3rd molars.
  - 2. The same possibility exists for the lower left jaw.

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### ANNEX I

# TRE.TMENTS OF HITLER

Source: BLESCHKE, Dr Hugo Johannes Position: Brig Gen in Waffen SS, Hitler's dentist

(NoTE: The following is a translation of notes written for this report by BLASCHKE, giving Hitler's abridged case history as a dental patient in the years 1934 to 1945.)

"In the beginning of the year 1934 I was, at the instance of the then (Prussian) Prime Minister GCERING, called to the Reich Chancellery. I was told that Adolf Hitler had a toothache. Upon examination I found a swelling of the gingiva of the left lower jaw, extending from the left central incisor to the left cuspid. The lower left lateral incisor had at its distal end a cavity which extended as far as the pulp cavity. The pulp was dead and the tooth sensitive to pressure. All lower incisors, especially the ones on the left, were very loose.

"The pains could be caused either by an abscess in the area of the roottips or by an abscess in the gingival pocket of the lower left lateral incisor.

"After opening of the root canal and removal of an abundance of tartar the pains soon decreased in intensity and disappeared completely over night.

"The \(\lambda\)-ray photos showed the following: a lentil-sized light spot around the tip of the root of the lower left lateral incisor. Strong atrophy of the alveoli, most pronounced around the lower right central incisor and the lower left central and lateral incisors...

"During the following days-besides the treatment of the root of the lower left lateral incisor-tarter was thoroughly. The gingivitis healed and the teeth became steadier and again fit for use. The treatment of the root took a normal course. The tooth was filled with iodoform-paste (alkhoff) and temporarily closed...

"In the upper jaw much more extensive work was necessary. There existed on either side bridges which were connected by an arch behind the left incisors. Three fourths of the upper left lateral incisor was broken off. The arch connecting the two bridges caused annoyance because food particles got caught in it easily. The gingiva had receded considerably from the edges of the existing gold crowns, so that the necks of the teeth were exposed. Caries had started at some of these points.

"The old bridges had to be removed and replaced. As the upper right central incisor was already absent and replaced by part of the bridge and as, in addition, the lateral incisor was 3/4 broken off, the gaps would have impeded speech. Hitler refused a temporary replacement through a removable dental plate for the period of manufacture (of the new replacements). It was then possible to remove both bridges in their entirety. They were taken out at each sitting and temporarily fastened again afterward. The root of the upper left lateral incisor, which had to be completely removed for the fitting-on of the new crown, received a temporary pivot-tooth.

# 1. REFERENCES

- a. USFET-MIS Center, Report OI-CIR/ 2, dated 15 Oct 45
- b. USFET-MIS Center, Report OI-CIR, 4, dated 29 Nov 45

# 2. REASON FOR REPORT

This information is being published in order to provide:

- a. data useful in the identification of Hitler or his remains:
- b. knowledge needed to expose those frauds who in later years may claim to be Hitler, or who may claim to have seen him or talked to him;
- c. research material for the historian, the doctor and the scientist interested in Hitler.

Descriptions of the teeth of Eva BRAUN and Martin BCRMANN are appended as Annexes II and III for the purpose of assisting identification of their remains, if found. The fact that they were intimates of Hitler and with him during the last days of the Battle of Berlin prompts inclusion of this material.

### 3. REPORT: "HITLER'S TEETH"

# a. Introduction: Source

(NOTE: For details of Source's career see Annex IV)

Dr Hugo Johannes BLASCHAE was a Brigadefuehrer (Leader of a Brigade) and Brig Gen in the Waffen-SS. He was called in to treat Hitler by Hermann GOERING in the early part of 1934. He was Hitler's dentist from that time until his departure from the Reichs Chancellory and BERLIN during the night of 20-21 Apr 45. His last treatment of Hitler was some time in mid-February, 1945. Neither he nor anybody else is believed to have treated the Fuehrer after that time.

The description of Hitler's teeth was made by BLASCHAE with the aid of X-ray pictures of Hitler's head taken on 19 Sep 44 (See Annex III of 1.b. above.) Source's information on Hitler's teeth is considered reliable.

BLASCHEE was interned on 28 May 45 and interrogated during November and December of 1945.

# b. Characteristics of Hitler's Teeth

### (1) Verbal Description

# (a) Natural Teeth

The following natural teeth were present in April 1945, either entirely (except for fillings) or partly:
(NOTE: Teeth that have fillings are hereafter referred to as present in their entirety, while those with crowns, or with chips or pieces broken off are referred to as present in part.)

Upper Right Jaw: Central incisor (partly)

Cuspid (partly)

Ist bicuspid (partly)

Upper Left Jaw: Central incisor (partly)
Lateral incisor (partly)

Cuspid (partly)

Lower Right Jaw: Central incisor (entirely)
Lateral incisor (entirely)
Cuspid (partly)
lst bicuspid (entirely)
2nd biscuspid (partly)

Lower Left Jaw : Central incisor (entirely)
Lateral incisor (entirely)
Cuspid (partly)
lst bicuspid (partly)
2nd bicuspid (partly)
3rd molar (partly)

# (b) Replacements

The following replacements were present in April 1945:

Upper Right Jaw: A bridge, extrending from central incisor to 2nd bicuspid and consisting of the following elements:

<u>l</u> Richmond crown (pivot in root canal, golden back - lingual - part, frontal - labial - porcelain facet) on central incisor,

2 Golden back part, frontal porcelain facet over space of missing lateral incisor,

3 Full gold crown over cuspid,

4 Full gold crown over 1st bicuspid,

5 Freely suspended golden masticating surface over space of missing 2nd bicuspid.

Upper Left Jaw: A bridge, extending from central incisor to 1st bicuspid and consisting of the following elements:

1 3/4 crown (window crown) on central incisor, consisting of frontal platinum ring and golden back part,

2 Richmond crown on lateral incisor,

3 Full gold crown on cuspid,

4 Freely suspended golden masticating surface and back part with frontal porcelain facet over space of missing 1st bicuspid.

This bridge extended farther until the end of October 1944. At that time BLASCHKE extracted the 2nd bicuspid and cut the bridge between the 1st and 2nd bicuspids. The straight edge produced by the cutting is strikingly characteristic.

Lower Right Jaw: A bridge, extending from cuspid to 1st elements:

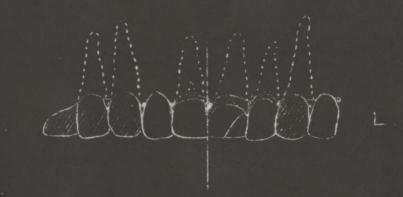
3 Full gold crown on 2nd bicaspid.

missing 1st moler.

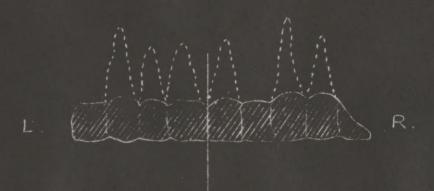
# Lover Left Jar :

# (2) Drawings

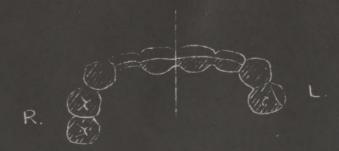
Upper Jaw, seen frontally (labial)



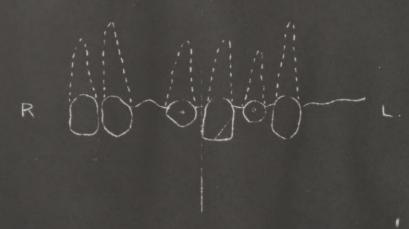
Upper Jaw, seen from the back (lingual)



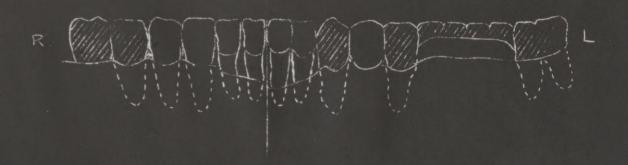
Upper Jat, seen from below (distal)



This is a view of the Upper Jaw, seen frontally, as it would appear if all artificial elements except fillings were removed:



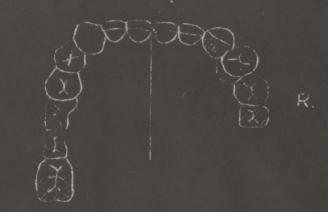
Lower Jav, seen frontally



Lover Jaw, seen from the back



# Lower Jaw, seen from above



This is a view of the Lower jaw, seen frontally, as it would appear if all artificial elements except fillings were removed:



### 4. CONCLUSIONS

BLASCHEE had furnished a rather hasty and incomplete description of Hitler's teeth to interrogators at a previous place of internment.

The Description on which the present report is based is the only one he made with the aid of the X-ray photos mentioned in par 3.a. It can, therefore, be considered authentic and accurate.

# 5. COMMENTS ..ND RECOMMEND..TIONS

No further interrogation of BL. SCHKE is planned at this Center.

Another report on Hitler, containing mainly descriptions of his mental make-up drawn from sources in intimate contact with him at one time or another, is in preparation.

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The recipients of this report are requested to submit special briefs on any subject upon which this detained should be interrogated and to indicate the desired distribution of the resultant report.

WHG, FM: WSM/ccj

For the Commanding Officer:

MALCOLM S. HILTY

Malcolu D. till.

Capt, AC

Chief, OI Section

5 Feb 46
DISTRIBUTION: "D"

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ANNEX II

### MARTIN BORMAIN'S TEETH

Source: BLASCH.I., Dr Hugo Johannes Position: Brig Gen in Waffen SS, Fitler's dentist

BLASCHKE states that he treated Martin BCRMANN regularly from 1937 to 1945, for the last time in March 1945. During that period BCRMANN was not treated by any other dentist. Source states that despite the non-availability of X-ray pictures (see last two paragraphs of Annex I) he remembers BORMANN's dentition in detail.

Description of Martin BCRMANN's Teeth

Upper Jaw, seen frontally



The upper right central incisor was missing. It had been lost about 1942. Since the gap had to be closed immediately, temporary window-crowns were made for the upper left central incisor and the upper right lateral incisor. The missing tooth was replaced by a procelain facet on a golden back part.

Since all upper incisors were more or less loosened by paradentosis, a bridge-support was planned extending from cuspid to cuspid. As, however, the loosening of the incisors progressed slowly, the temporary arrangement proved satisfactory and the bridge was never made.

In the upper jaw were present after removal of the old bridges; (see drawing on page 6 of report)

consequently, two possibilities of fered themselves:

- 1. 4. removable, supported prosthesis, restoring the ability to masticate as for as the bridge in the lover right jaw would allow;
- 2. .. fixed bridge with a slightly smaller masticating surface. Since in Hitler's case an edge-to-edge bite was present, the ability to masticate would have been sufficient, despite the missing molars,

"hitler rejected a removable prosthesis. He remarked to this point that for him as a vegetarian the fixed bridge would suffice, since he had a special kitchen at his disposal at all times.

"The following bridge was then made (see drawings on page 5 of report).

"Hitle 's treatment was finished. The treatment of the root of the lover left lateral incisor was repeated during one of the last sittings (for the fitting of the bridge), after an X-ray check-up had reverled a noticeable reduction of the infection focus at the root-tip.

"I agreed with Hitler that I would have to examine his teeth in intervals of three or four months at the most, since only constant supervision, especially of the lover incisors, could tend to avoid similar extensive work in the upper jaw.

"I was able to make these check-ups fairly regularly until the outbreak of the war.

"New extensive work was not necessary during those years...

"Treatments were preformed at either the Berlin Chancellery or the Berghof on Obersalzberg. Lental stations existed in either place.

"In the years 1938-39 I did not succeed for a long time (I think it was a little more than a year) in treating Hitler. Thenever I called I was told that treat ent was not possible it the time, and that I should wait until notified. Then I was finally called pain was present. The upper left central incisor had an extensive caries...

"In contrast to previous years, treatments from now on were more difficult to carry out, since Hitler had very little time. He was in addition very worried about pains that might be caused by the treatments and demanded the greatest caution to have them avoided. I could never be sure whether a treatment scheduled could come off or whether it would be postponed indefinitely. It was, however, possible to keep the tooth permanently quiet... A conclusion of the treatment, i.e., filling of the root and final filling of the cavity, was never achieved...

"..t the "..clfsschanze" headquarters treatments were performed in a truck-mounted dental station, provided by the guard battalion of the Regiment "Gross-Leutschland". Lat r, on account of the menace of air-raids, a dental station was installed in one of the shelters.

"Towards the end of September (1944) I was called to the headquarters. Hitler complained about slight tenderness of the gingiva of the upper left jaw. he was bed-ridden. He was, as Prof Morell told me, suffering from an inflammation of the maso-pharyngeal area...

"Examination of the left upper jaw disclosed only slight rubor of the gingive around the 2nd bicuspid, no pain and hardly any secretion. When Fitler was able to get up again, an X-ray photo of the 2nd bicuspid was made.

The picture showed a surprise formation of a deep pocket around the whole root, almost as far as the tip of the root. There must, consequently, have been an inflammation of this tooth in existence for the last months. It either did not cause any pain, or the pain--wrongly diagnosed as neurolgic--was killed through obtundents. Despite thorough questioning I could not get a clear picture of the history of these pains from Hitler. He disliked intensely talking about his health.

"I wanted earliest possible extraction of the tooth... "e had to postpone this, however, because Hitler's general condition did not permit an operation of this kind...

"it the end of October (1944) I obtained, after repeated reminders, permission to perform the extraction.

"The old bridge or the left upper jaw was then cut in front of the gold crown on the 2nd bicuspid... The tooth, together with the cut-off part of the bridge, came out very easily...

"On the occasion of this treatment I insisted that the treatment of the root of the upper left central incisor be at last brought to an end, so that unnecessary complications could be avoided... I was promised that I would be called within the next few weeks. I actually did receive the order, on 15 December 1944, to report at the headquarters, where I arrived on 16 December. The headquarters was then in the West, in the vicinity of GIESSEN. Since the offensive in the West had started that morning I did not treat him...

"From the middle of January 1945 Hitler was constantly in the Berlin Reich Chancellery. Again and again he postponed the treatment of the upper left incisor. He came once to the dental station for a short while in mid-February for a superficial examination. Besides the removal of tartar on the lower incisors no treatment was performed on that occasion."

(BLASCHER's statement on files containing cards and X-ray photos of his patients at the Reich Chancellery follows.)

"The patients' file cards as well as the X-ray pictures of their teeth were, since the middle of January 1945, constantly kept at the dental station in the Voss-Strasse shelter of the Reich Chancellery.

"On the night of 20/21 January 1945, I was ordered to be ready for movement, with a minimum of beggage, within an hour. I was helped in packing the little portable dental station which I wanted to take with me by my dental helper, Mrs K ethe LUSER ANN, and my essistant, Dr RCHKAMM. It is possible and even likely that the files were put in the same box as the dental station. My baggage was then supposed to be sent from the Tempelhof sirfield to SALZBURG in a transport plane carrying baggage exclusively. This plane never arrived at SALZBURG, and from the Obersalzberg it could never be ascertained what had become of it."

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### ANNEX III

# EVA BRAUN'S TEETH

Source: BLASCHKE, Dr Hugo Johannes Position: Brig Gen in Waffen SS, Hitler's dentist

BLASCHKE states that he treated Eva BRAUN at irregular intervals from 1935 to 1945--for the last time at the BERLIN Reich Chancellery in March 1945. Treatments were performed during her stays at the Chancellery and at the Berghof on Obersalzberg. When in LUNICH during Hitler's stays at his field headquarters or during his travels, she was treated by a local dentist whose name BLASCHKE is unable to recall.

Source states that, because of the irregularity of his treatments, he is not absolutely certain about all the details of Eva BRAUN's dentition and he regards that the X-ray pictures taken of it (see last two paragraphs of Annex I) are not available.

Drawings of Eva BRAUN's Teeth

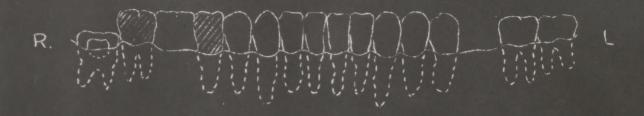
Upper Jaw, seen frontally

R MANAGER B

Lower Jav, seen frontally

R. 7 997779999 L

### Lower Jav, seen frontally



The lower right 3rd molar has not broken through all the way, and therefore occupies a lower position than the 2nd molar. It has an iodoform filling in the pulp cavity. A large cavity on its masticating and labial surfaces is filled with cement.

# Color of Teeth

(NOTE: The color symbols used are those of the S.S.WHITE color ring for dentist.)

Upper	right	cent	raı	incisor	•	"0"		
Upper	right	late	ral	incisor	:	11611		
Upper	right	cusp	id		:	n Gu		
Upper	right	lst	bicu	spid		n G.n		
Upper	right	2nd	bicu	spid		"G"		
Upper	right	lst	mola	ır	:	"G"		
Upper	right	2nd	mole	ir	:	"G"		
Upper	left	centi	ral i	ncisor	:	11611		
Upper	left :	later	ral i	ncisor		11611		
Upper	left o	uspi	id			# Gn	and	"K"
Upper	left:	lst b	oicus	spid		"17"	or	"18"
Upper	left 2	2nd b	oicus	spid		иGп	(?)	
Upper	left :	2nd r	nolar	•	:	n Gn		
Upper	left	3rd n	nolai	c		?		
Lower	right	cen	tral	incisor	:	11611		

Lower right lateral incisor: "6"

Lover	right	cus	pid			"G"
Lower	right	: lst	bic	cuspid		n Gu
Lower	right	3rd	l mol	lar		"17
Lower	left	cent	ral	inciso	r:	11611
Lower	left	late	ral	inciso	r:	11611
Lower	left	cus	oid		:	" G"
Lower	left	lst	bic	uspid		n Gu
Lower	left	2nd	bic	uspid		# Q.II
Lower	left	2nd	mola	ar		H GH
Lower	left	3rd	mol	ar		?

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# ANNEX IV

# CHRONOLOGICAL ACCOUNT OF SOURCE'S CAREER

Source: BL.SCHAE, Dr Hugo Johannes Position: Brig Gen in Waffen SS, Hitler's dentist

# Chronological History

14 Nov 81 : Born at NEUST.DT/ Prussia

1885 : Moved to BERLIN

1897 : Finished Public School

1908-1911 : Studied dentistry at University of Pennsylvania, Member

of Psi Omega Zeta

1911 : Received degree of DDS

1911 : Took 6 weeks' course at Royal Lental Hospital, LCNDON,

Ingland

Fall of 1911: Opened own office in BERLIN

1914-1918 : Served as Dental Officer with German Army, first at dental

station of Military Hospital FRANAFURT/Oder, later dental

station of III Corps in BERLIN

1919-1941 : Own office in BIRLIN

1000 . Regrn treating Capt. later Reichsmarschall. GOERING

1931 : Joined NSLAP and SA, later NSKK

1934 : Called in to treat Hitler

1935 : Married Maria KLEIN-DILPCLD

1935 : Joined SS. Appointed to rank of Sturmbahmfuehrer (Major).

Put in charge of instituting dental care for whole SS.

Chief of Dental Section in SS Surgeon General's Office

1941 : Transferred to Caffen-SS. Attained position of Brigade fuehrer

and rank of Brig Gen of Waffen-SS

20/21 Apr 45: Left BERLIN for B. RCHTESG DEN on orders from Hitler

28 May 45 . Arrested at SALZBURG

OI/CIR/4, 29 Nov 45
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OF DACIR 380-3

.by Richard S. Smith Col, G8 Chief, SMI Br/ACSI/DA on 22 Sept 1959

- 1 -